

## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSPORTS  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101674

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 8:27 pm

Date: 5/4/92

Signature: Anthony Gambino

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: Anthony Gambino

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes☐ No

Signature: Anthony Gambino

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

MOTRIN

Test Required:

- ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☒ CODE 102

Sex of Donor:

- ☒ Male  
☐ Female

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM

(Do not write in this section)

- 1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

T-JH 01767

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James Bellamy

Date: 5/4/92

Name of Donor: Kacwio

(Last)

James

(First)

(M)

Telephone No. (Donor):

203 352 8600

Site of Collection: Albany

New York

UCL-015 2/92

WWE/WAR 001853

**AEGIS  
ANALYTICAL  
LABORATORIES, INC.**

624 Grassmere Park • Suite 21 • Nashville, Tennessee 37211  
(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED:  
DATE RECEIVED : MAY 4, 1992  
DATE REPORTED : MAY 6, 1992 (0418)  
MAY 21, 1992

IDENTIFICATION #: 101674

INSTITUTION:  
MAURO DiPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*  
SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN CHORIONIC GONADOTROPIN (HCG)	1.0 IU/ML
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN REFERENCE MATERIAL.

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**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS : POSITIVE**

CODEINE  
MORPHINE

T-JH 01768

19-NORANDROSTERONE  
19-NORETIOCHOLANOLONE  
19-NOREPIANDROSTERONE  
19-NORANDROSTERONE/CIS-ANDROSTERONE  
RATIO = 0.12  
(CONSISTENT AND EXPECTED WITH THE USE  
NANDROLONE).  
TESTOSTERONE/EPITESTOSTERONE RATIO  
> 6 (CONSISTENT AND EXPECTED WITH  
THE USE OF TESTOSTERONE.

OTHER DRUGS: NONE DETECTED

*David L. Black, Ph.D. 5-21-92*  
David L. Black, Ph.D.  
Laboratory Director

WWE/WAR 001854

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ANALYTICAL  
LABORATORIES, INC.**

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED:  
DATE RECEIVED : MAY 4, 1992  
DATE REPORTED : MAY 6, 1992 (0418)  
MAY 21, 1992

IDENTIFICATION #: 101674

INSTITUTION:  
MAURO DiPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: M

PH: 5.0

SPECIFIC GRAVITY: 1.020

CREATININE (MG/L): 1165

TESTOSTERONE (NG/ML): 71

EPITESTOSTERONE (NG/ML): 0.9

T/E RATIO: 78

HUMAN CHORIONIC GONADOTROPIN (HCG): <1.0 IU/ML

HUMAN GROWTH HORMONE (HGH): 0.9 NG/ML

LUTEINIZING HORMONE (LH): 3.2 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	0.23	0.23
CIS-ANDROSTERONE	8.44	8.27
ANDROSTENEDIONE	0.20	0.20
DEHYDRO-		
EPIANDROSTERONE	4.78	4.69
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	1.68	1.65
ETIOCHOLANOLONE	13.43	11.53
TESTOSTERONE	2.08	2.04

\*\*\*\*\*

\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

T-JH 01769

David L. Black, Ph.D.  
Laboratory Director

WWE/WAR 001855

4.

# DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101631

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 7:26 pm Date: 6/7/92 Signature: K Meschon

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: Sam

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: K Meschon

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days:

Tylenol III, Nasal Spray

Test Required:



Drug of Abuse



Anabolic Steroids



CODE 101



CODE 102



CODE 103

Sex of Donor:



Male



Female

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM (Do not write in this section)

1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James Callaway Date: 6/7/92

Name of Donor: Henwick JAMES B  
(Last) (First) (M)

Telephone No. (Donor):

Site of Collection: Dayton

T-JH 01770

UCSA 015 107

WWE/WAR 001857

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ANALYTICAL  
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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JUNE 7, 1992  
DATE RECEIVED: JUNE 9, 1992 (0520)  
DATE REPORTED: JUNE 19, 1992

IDENTIFICATION #: 101631

INSTITUTION: MAURO DIPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*

SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN REFERENCE MATERIAL.

\*\*\*\*\*

**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS : POSITIVE**

19-NORANDROSTERONE  
19-NORETIOCHOLANOLONE  
19-NORANDROSTERONE/CIS-ANDROSTERONE  
RATIO = 0.13  
(CONSISTENT AND EXPECTED WITH THE USE  
NANDROLONE).  
TESTOSTERONE/EPITESTOSTERONE  
RATIO >6 (CONSISTENT AND EXPECTED  
WITH THE USE OF TESTOSTERONE).

OTHER DRUGS: NONE DETECTED

*David L. Black, Ph.D. 6-14-92*  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01771

WWE/WAR 001858

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JUNE 7, 1992  
DATE RECEIVED: JUNE 9, 1992 (0520)  
DATE REPORTED: JUNE 19, 1992

IDENTIFICATION #: 101631

INSTITUTION: MAURO DiPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 1215  
TESTOSTERONE (NG/ML): 110  
EPITESTOSTERONE (NG/ML): 3.5  
T/E RATIO: 31  
HUMAN GROWTH HORMONE (HGH): 0.6 NG/ML  
LUTEINIZING HORMONE (LH): 3.4 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	0.19	0.16
CIS-ANDROSTERONE	8.10	6.67
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO-		
EPIANDROSTERONE	1.92	1.58
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	10.78	8.87
TESTOSTERONE	2.40	1.98

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

*David L. Black, Ph.D. 6-19-92*  
David L. Black, Ph.D.  
Laboratory Director

WWE/WAR 001859

5.



## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101733

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 8:15 PM Date: 6/19/92 Signature: \_\_\_\_\_

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: \_\_\_\_\_

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: \_\_\_\_\_

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

Aspirin. Excedin

Test Required:

☐ Drug of Abuse

☐ Anabolic Steroids

☐ CODE 101

☐ CODE 102

☒ Code 107

Sex of Donor: ☒ Male

☐ Female

Spec Gravity 1.030  
pH. 5.0

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM

(Do not write in this section)

1st Page (White Copy): Medical Review Officer

2nd Page (Yellow Copy): Drug Program Coordinator

3rd Page (Pink Copy): Donor

4th Page (Blue Copy): Collector

5th Page (Gold Copy): Anabolic Steroids Testing Laboratory

6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: \_\_\_\_\_

Date: 6/19/92

Name of Donor: \_\_\_\_\_

(Last)

(First)

(M)

Telephone No. (Donor): \_\_\_\_\_

Site of Collection: Pittsburg, PA

T-JH 01773

UC/DA-016 102

WWE/WAR 001861

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JUNE 19, 1992  
DATE RECEIVED: JUNE 23, 1992 (0568)  
DATE REPORTED: JULY 9, 1992

IDENTIFICATION #: 101733

INSTITUTION: MAURO DiPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*

SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN REFERENCE MATERIAL.

\*\*\*\*\*

**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

DRUG RESULTS : POSITIVE

T-JH 01774

CODEINE - 1000 NG/ML  
19-NORANDROSTERONE  
19-NORETIOCHOLANOLONE  
19-NORANDROSTERONE/CIS-ANDROSTERONE  
RATIO = 0.137  
(CONSISTENT AND EXPECTED WITH THE USE  
NANDROLONE).

OTHER DRUGS: NONE DETECTED

\*PLEASE NOTE SPECIFIC GRAVITY  
LOWER THAN NORMAL OF 1.010

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

WWE/WAR 001862

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JUNE 19, 1992  
DATE RECEIVED: JUNE 23, 1992 (0568)  
DATE REPORTED: JULY 9, 1992

IDENTIFICATION #: 101733

INSTITUTION: MAURO DiPASQUALI, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: -  
PH: 5.0  
SPECIFIC GRAVITY: 1.005\*  
CREATININE (MG/L): 230  
TESTOSTERONE (NG/ML): 9.4  
EPITESTOSTERONE (NG/ML): <3.5  
T/E RATIO: N/A

HUMAN GROWTH HORMONE (HGH): <0.2 NG/ML  
LUTEINIZING HORMONE (LH): 1.8 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	0.12	5.22
CIS-ANDROSTERONE	1.59	6.91
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO-		
EPIANDROSTERONE	0.24	1.04
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	1.42	6.17
TESTOSTERONE	0.19	0.83

\*\*\*\*\*

\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01775

WWE/WAR 001863

b.

## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101055

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 8:45pm Date: 7/31/92 Signature: [Signature]

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: [Signature]

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes ☐ No Signature: [Signature]

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

NUSTAR, EXCEL, VICO

Test Required: ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☒ CODE 102  
☒ CODE 103

Sex of Donor: ☒ Male  
☐ Female

PH. 7.0  
SPG 1.010  
TEMP 96

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM

(Do not write in this section)

1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: JAMES HENRIK [Signature] Date: 7/31/92

Name of Donor: HENRIK JAMES  
(Last) (First) (M)

Telephone No. (Donor): 203-352-8600

Site of Collection: SALT LAKE CITY

T-JH 01776

UGAARTE 107

WWE/WAR 001865

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LABORATORIES, INC.**

624 Graasmere Park • Suite 21 • Nashville, Tennessee 37211  
(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JULY 31, 1992  
DATE RECEIVED: AUG. 3, 1992 (736/753)  
DATE REPORTED: AUG. 24, 1992

IDENTIFICATION #: 101055

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*

SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN REFERENCE MATERIAL.

\*\*\*\*\*

**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS : POSITIVE**

19- NORANDROSTERONE  
19- NORANDROSTERONE/CIS-ANDROSTERONE  
RATIO = 0.91  
(CONSISTENT AND EXPECTED WITH THE  
USE OF NANDROLONE)

TESTOSTERONE/EPITESTOSTERONE RATIO  
> 6 (CONSISTENT AND EXPECTED WITH THE  
USE OF TESTOSTERONE)

OTHER DRUGS: NONE DETECTED

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01778

WWE/WAR 001866

**AEGIS  
ANALYTICAL  
LABORATORIES, INC.**

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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: JULY 31, 1992  
DATE RECEIVED : AUG. 3, 1992 (736/753)  
DATE REPORTED : AUG. 24, 1992

IDENTIFICATION #: 101055

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 1486  
TESTOSTERONE (NG/ML): 45  
EPITESTOSTERONE (NG/ML): 1.3  
T/E RATIO: 35  
HUMAN GROWTH HORMONE (HGH): 1.3 NG/ML  
LUTEINIZING HORMONE (LH): 2.7 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	0.61	0.41
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO- EPIANDROSTERONE	3.46	2.33
DIHYDRO- TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	1.36	0.92
TESTOSTERONE	0.36	0.20

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01777

WWE/WAR 001867

7.



## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSPTS  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101161

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 8:47p Date: 8/16/92 Signature: Robert T. Martin

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: \_\_\_\_\_

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: Robert T. Martin

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

BUSPAR Excel Vicodin Tylenol

Test Required:

- ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☐ CODE 102

Sex of Donor:

- ☒ Male  
☐ Female

Specific Gravity 1.015

pH 5.0

Temperature 96°

103

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM

(Do not write in this section)

1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James P. Bellamy

Date: 8/16/92

Name of Donor: BELLAMY

JAMES

B

(Last)

(First)

(M)

Telephone No. (Donor): (203) 352-8602

Site of Collection: PETER BOURNETH, ONTARIO

T-JH 01779

UC/RA 013 207

WWE/WAR 001869

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ANALYTICAL  
LABORATORIES, INC.**

624 Grassmere Park • Suite 21 • Nashville, Tennessee 37211  
(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: AUG. 16, 1992  
DATE RECEIVED: AUG. 19, 1992 (796/816)  
DATE REPORTED: SEPTEMBER 2, 1992

IDENTIFICATION #: 101161

INSTITUTION: MAURO DIPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*

SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN REFERENCE MATERIAL.

\*\*\*\*\*

**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

DRUG RESULTS : POSITIVE

T-JH 01780

19-NORANDROSTERONE  
19-NORANDROSTERONE/CIS-ANDROSTERONE  
RATIO = 0.11  
(CONSISTENT AND EXPECTED WITH THE  
USE OF NANDROLONE).

METHYLTESTOSTERONE METABOLITE #1  
METHYLTESTOSTERONE METABOLITE #2  
(CONSISTENT AND EXPECTED WITH THE  
USE OF METHYLTESTOSTERONE).

TESTOSTERONE/EPITESTOSTERONE RATIO  
>6 (CONSISTENT AND EXPECTED WITH THE  
USE OF TESTOSTERONE).

OTHER DRUGS: NONE DETECTED

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

WWE/WAR 001870

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LABORATORIES, INC.**

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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: Aug. 16, 1992  
DATE RECEIVED : Aug. 19, 1992 (796/816)  
DATE REPORTED : SEPTEMBER 2, 1992

IDENTIFICATION #: 101161

INSTITUTION: MAURO DIPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 900  
  
TESTOSTERONE (NG/ML): 50  
EPITESTOSTERONE (NG/ML): <3.5  
T/E RATIO: >14

HUMAN GROWTH HORMONE (HGH): 0.9 NG/ML  
LUTEINIZING HORMONE (LH): 1.7 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	2.17	2.41
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO-		
EPIANDROSTERONE	0.68	0.76
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	3.14	3.49
TESTOSTERONE	0.98	1.09

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01781

WWE/WAR 001871

8.

WWE/WAR 001872

## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 100895

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 8:27 p.m. Date: 9-11-92 Signature: [Signature]

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: \_\_\_\_\_

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: [Signature]

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

PERCOCET, BUSPAR, SOMA & VALIUM  
EXCEL

Test Required: ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☐ CODE 102  
☒ CODE 103

Sex of Donor: ☒ Male  
☐ Female

Specific Gravity 1.025

pH 5.5

Temperature 96

## INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM

(Do not write in this section)

1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

T-JH 01782

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: [Signature] Date: 9/11/92

Name of Donor: James B  
(Last) (First) (M)

Telephone No. (Donor): (203) 752-8602

Site of Collection: LA Sports Arena WWE/WAR 001873

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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: SEPT. 11, 1992  
DATE RECEIVED : SEPT. 15 1992(795)  
DATE REPORTED : OCT. 5, 1992  
IDENTIFICATION #: 100895 (0902/0932)  
INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*  
SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS  
CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING  
DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED  
PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER  
TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN  
REFERENCE MATERIAL.

\*\*\*\*\*

**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS : POSITIVE**

19 - NORANDROSTERONE

19 - NORANDROSTERONE/CIS  
ANDROSTERONE = 0.12

OTHER DRUG: NONE DETECTED

*David L. Black, Ph.D.*  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01783

WWE/WAR 001874

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: SEPT. 11, 1992  
DATE RECEIVED: SEPT. 15, 1992  
DATE REPORTED: OCT. 5, 1992  
IDENTIFICATION #: 100895 (0902/0932)  
INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

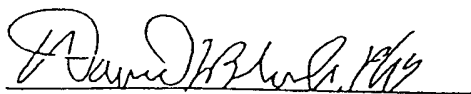
\*\*\*\*\*

SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 1.10  
TESTOSTERONE (NG/ML): 20  
EPITESTOSTERONE (NG/ML): <3.5  
T/E RATIO: >5.7  
HUMAN GROWTH HORMONE (HGH): 1.9 NG/ML  
LUTEINIZING HORMONE (LH): 0.7 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	1.78	1.60
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO-		
EPIANDROSTERONE	1.16	1.05
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	2.28	2.05
TESTOSTERONE	0.52	0.47

\*\*\*\*\*

\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01784

WWE/WAR 001875

9.

WWE/WAR 001876



## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 101303

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 09:43PM Date: 09-19-92 Signature: Robert P. Hall

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: \_\_\_\_\_

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes ☐ No

Signature: Robert P. Hall

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

Cepo, penicillin, perisat, Tylenol, Excel, Valium

Test Required:

- ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☐ CODE 102

Sex of Donor:

- ☒ Male  
☐ Female

Specific Gravity 1.025

pH 6.0

Temperature 98°

X Case 103

INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM  
(Do not write in this section)

- 1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James Hall Date: 9/19/92

Name of Donor: HALL JAMES M.  
(Last) (First) (M)

Telephone No. (Donor): 203 322 8602

Site of Collection: INDY

T-JH 01785

UC/SA-015 107

WWE/WAR 001877

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: SEPT. 19, 1992  
DATE RECEIVED: SEPT. 23, 1992  
DATE REPORTED: OCT. 22, 1992  
IDENTIFICATION #: 101303 (0947/1000)

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - CDT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*  
SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS  
CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING  
DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN CHORIONIC GONADOTROPIN (HCG)	1.0 IU/ML
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED  
PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER  
TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN  
REFERENCE MATERIAL.

\*\*\*\*\*  
**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS: POSITIVE**

T/E >6

(CONSISTENT AND EXPECTED WITH THE USE OF  
TESTOSTERONE)

OTHER DRUGS: NONE DETECTED

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01705

WWE/WAR 001878

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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: SEPT. 19, 1992  
DATE RECEIVED: SEPT. 23, 1992  
DATE REPORTED: OCT. 22, 1992  
IDENTIFICATION #: 101303 (0947/1000)  
INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**



\*\*\*\*\*  
SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 1168  
TESTOSTERONE (NG/ML): 43  
EPITESTOSTERONE (NG/ML): <3.5  
T/E RATIO: >12  
HUMAN GROWTH HORMONE (HGH): 0.5 NG/ML  
LUTEINIZING HORMONE (LH): 1.4 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	0.84	0.72
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO- EPIANDROSTERONE	2.18	1.87
DIHYDRO- TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	1.72	1.47
TESTOSTERONE	0.53	0.45

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

*David L. Black, Ph.D.*

David L. Black, Ph.D.  
Laboratory Director

T-JH 01787

WWE/WAR 001879

10.

## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSports  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 100445

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialled, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 7:50 AM Date: 10-24-92 Signature: Paul H. Holdup

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: NA

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: Paul H. Holdup

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

Valium, Plavix, Solmin, Buspar, Palamox  
Cortisone, Tylenol 3

Test Required:

- ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☒ CODE 102  
CODE 103

Sex of Donor:

☒ Male

☐ Female

Specific Gravity 1.015

pH 5.0

Temperature 96

INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM  
(Do not write in this section)

- 1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James B. Hill

Date: 10/23/92

Name of Donor: Hill

(Last)

JAMES

(First)

B

(M)

Telephone No. (Donor): (203) 352-8602

Site of Collection: Stamford, CT

T-JH 01782

WWE/WAR 001881

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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: Oct. 24, 1992  
DATE RECEIVED: Oct. 27, 1992  
DATE REPORTED: Nov. 10, 1992

IDENTIFICATION #: 100445 (1081/1120)

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) URINE DRUG PROFILE - COT (DRUG/STEROIDS/HORMONES)**

\*\*\*\*\*  
SPECIMEN SUBMITTED WAS ANALYZED BY IMMUNOASSAY AND GAS  
CHROMATOGRAPHY-MASS SPECTROMETRY TECHNIQUES FOR THE FOLLOWING  
DRUG CLASSES AT THE THRESHOLDS INDICATED:

DRUG CLASS	THRESHOLD (NG/ML)
ANABOLIC STEROIDS	10
BETA-BLOCKERS	500
CANNABINOID METABOLITES	100
DIURETICS	500
HUMAN GROWTH HORMONE (HGH)	N/A
LUTEINIZING HORMONE (LH)	N/A
NARCOTICS	500
STIMULANTS	500

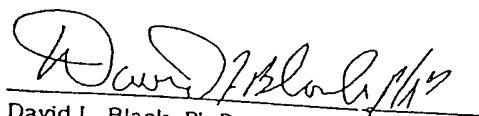
THE DRUGS INCLUDED IN EACH CLASS ARE INDICATED ON THE ATTACHED  
PAGES OF THIS REPORT. POSITIVE RESULTS ARE REPORTED ONLY AFTER  
TWO SEPARATE ANALYSES OF THE SPECIMEN AND COMPARISON TO KNOWN  
REFERENCE MATERIAL.

\*\*\*\*\*  
**PROFILE RESULTS - DRUG/ANABOLIC STEROIDS**

**DRUG RESULTS: POSITIVE**

T/E > 6 (CONSISTENT AND EXPECTED  
WITH THE USE OF TESTOSTERONE)

**OTHER DRUGS: NONE DETECTED**

  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01789

WWE/WAR 001882

**AEGIS  
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David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: Oct. 24, 1992  
DATE RECEIVED : Oct. 27, 1992  
DATE REPORTED : Nov. 10, 1992  
IDENTIFICATION #: 100445 (1081/1120)

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
WARKWORTH, ONTARIO  
K0K3K0

**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

\*\*\*\*\*

SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (mg/L): 1124  
TESTOSTERONE (ng/mL): 60  
EPITESTOSTERONE (ng/mL): <3.5  
T/E RATIO: >17  
HUMAN GROWTH HORMONE (HGH): <0.2 ng/mL  
LUTEINIZING HORMONE (LH): 1.7 mIU/mL

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	1.48	0.43
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO- EPIANDROSTERONE	0.75	0.67
DIHYDRO- TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	3.44	3.06
TESTOSTERONE	1.96	1.74

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 ng/mL DEUTERATED TESTOSTERONE

*David L. Black, Ph.D.*  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01790

WWE/WAR 001883

## DRUG ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

TITANSPORTS  
1241 East Main Street  
Stamford, CT 06902

CONTROL ID NUMBER: 100445

- 1.a. The below named donor produced a urine specimen under direct observation. I then personally initialed, dated and affixed the security seals to the specimen bottles in the visual presence of the donor and I had the donor initial and date the security seals in my presence.

Time of Day: 750 AM Date: 10-24-92 Signature: Paul H. Holdorf

- 1.b. If the person who observed the collection is different than the person who signed above:

Signature of observer: N/A

2. I certify that the urine specimens appeared normal in color, temperature and sediment content.

☒ Yes

☐ No

Signature: Paul H. Holdorf

3. The donor stated he has taken the following prescription and non-prescription (over-the-counter) medication and/or supplements within the last 15 days.

Valium, Plavix, Solmin, Buspar, Palaproc  
Cortisone, Tylenol 3

Test Required:

- ☐ Drug of Abuse  
☐ Anabolic Steroids  
☐ CODE 101  
☐ CODE 102  
☒ CODE 103

Sex of Donor:

☒ Male

☐ Female

Specific Gravity 1.015

pH 5.0

Temperature 96

INSTRUCTIONS FOR DISTRIBUTION OF THIS FORM  
(Do not write in this section)

- 1st Page (White Copy): Medical Review Officer  
2nd Page (Yellow Copy): Drug Program Coordinator  
3rd Page (Pink Copy): Donor  
4th Page (Blue Copy): Collector  
5th Page (Gold Copy): Anabolic Steroids Testing Laboratory  
6th Page (Green Copy): Drug of Abuse Testing Laboratory

## DONOR'S STATEMENT

I certify that I produced the attached urine specimen under observation; that it consists entirely of my own urine; that my specimen bottles were capped and sealed in my presence; and that the Control Identification Numbers on all specimen bottles are the same.

Signature: James B. Williams

Date: 10/23/92

Name of Donor: Williams

JAMES  
(First)

B  
(M)

Telephone No. (Donor): (203) 352-8602

Site of Collection: Stamford, CT

T-JH 0178C



**AEGIS  
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(615) 331-5300 • 1-800-533-7052

David L. Black, Ph.D., DABFT  
Director of Laboratories

DATE COLLECTED: Oct. 24, 1992  
DATE RECEIVED: Oct. 27, 1992  
DATE REPORTED: Nov. 10, 1992

IDENTIFICATION #: 100445 (1081/1120)

INSTITUTION: MAURO DiPASQUALE, MD  
23 MAIN STREET  
MARKWORTH, ONTARIO  
K0K3K0

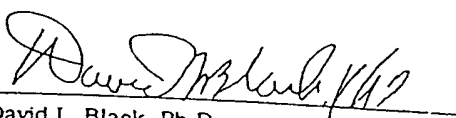
**(00103) PROFILE RESULTS-ANDROGEN STEROIDS/HORMONES**

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SEX: M  
PH: 5.0  
SPECIFIC GRAVITY: 1.020  
CREATININE (MG/L): 1124  
TESTOSTERONE (NG/ML): 60  
EPITESTOSTERONE (NG/ML): <3.5  
T/E RATIO: >17  
HUMAN GROWTH HORMONE (HGH): <0.2 NG/ML  
LUTEINIZING HORMONE (LH): 1.7 MIU/ML

HORMONE/STEROID RATIOS	D <sub>2</sub> T RATIO*	RATIO/G CREATININE
11-BETA-HYDRO-ANDROSTERONE	<0.10	N/A
CIS-ANDROSTERONE	1.48	0.43
ANDROSTENEDIONE	<0.10	N/A
DEHYDRO-		
EPIANDROSTERONE	0.75	0.67
DIHYDRO-		
TESTOSTERONE	<0.10	N/A
EPITESTOSTERONE	<0.10	N/A
BETA-ESTRADIOL	<0.10	N/A
ESTRIOL	<0.10	N/A
ETIOCHOLANOLONE	3.44	3.06
TESTOSTERONE	1.96	1.74

\*\*\*\*\*  
\*RATIO (MASS SPECTROMETER BASE ION/434 AMU DEUTERATED  
TESTOSTERONE) COMPARED TO 50 NG/ML DEUTERATED TESTOSTERONE

  
David L. Black, Ph.D.  
Laboratory Director

T-JH 01790

WWE/WAR 001883